OIPE	PART B - FEE(S) TRANSMITTAL				~ <u>03</u> /	16/N	6	
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03/17/2006 MAHMED2 00000062 10664522					. Brunet		(Depositor's name)	
01 FC:1501 02 FC:1504				March 1	rumeto 15, 2006		(Signature) (Date)	
APPLICATION NO.	FILING DATE]	FIRST NAME) INVENTOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/664,522	09/17/2003		Shawn M	Chawgo	205P117		4272	
TITLE OF INVENTION: A					I	(0) 5115		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	nprovisional NO \$1400			\$300	\$1700		03/16/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	J			
LEJA, RO	2836		361-119000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the nar or agents (2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Wall Marjama & Bilinski LLP 2				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
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John Mezzalingua Associates, Inc. East Syracuse, NY								
Please check the appropriate					orporation or oth	er private gr	oup entity Government	
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Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached and additional								
Publication Fee (No small entity discount permitted) Advance Order - # of Copies Deposit Account Number 50-0289 is attached any additional Deposit Account Number 50-0289 (enclose an extra copy of this form).							itional credit any overpayment, to copy of this form).	
	MALL ENTITY status. See 3) 37 CFR 1.27.	b. Applic	ant is no longer claiming SMA	LL ENTITY stat	aus. See 37 C	FR 1.27(g)(2).	
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Muldoon

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March 15, 2006

<u>38,249</u>